

Return Date: 8/19/19

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK

-----X
In re:

Andrea Ann Marie Gordon

Case No.
Chapter

Debtor(s)
-----X

NOTICE OF MOTION

PLEASE TAKE NOTICE that upon the annexed application of

Andrea Ann Marie Gordon a hearing will be held before the Hon.
Robert Grossman Bankruptcy Judge, to consider the motion for an Order
granting relief as follows:

requesting to apply for a modification.

Date and time of hearing: 8/19/19 7/31/19 28

Location: U.S. Bankruptcy Court
290 Federal Plaza

Central Islip, New York 11722

Courtroom # 860, 8th Floor

Dated: 6/20/19

Agordon

Signature

Print name: Andrea Gordon

Address: 40 Elm Pl

Freeport, NY 11520

Phone: 516-608-5409

Email: bjason08@gmail.com

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK

In Re:

Andrea Ann Marie Gordon

Debtor(s)

Chapter

13

Case No.

8-19-74145

LOSS MITIGATION REQUEST - BY DEBTOR

I am a Debtor in this case. I hereby request to enter into the Loss Mitigation Program with respect to *[Identify the property, loan and creditor(s) for which you are requesting loss mitigation]*:

40 Elm Pl., Freeport, NY 11520
[Identify the Property]
 LoanCare Servicing # [REDACTED] 5817 Wells Fargo [REDACTED] 5872
[Loan Number]
 LoanCare Svcg. POB8068, Virginia Bch, Va 23450
[Creditor's Name and Address]
 Wells Fargo POB 14411, Des Moines, IA 50306

SIGNATURE

I understand that if the Court orders loss mitigation in this case, I will be expected to comply with the Loss Mitigation Procedures. I agree to comply with the Loss Mitigation Procedures, and I will participate in the Loss Mitigation Program in good faith. I understand that loss mitigation is voluntary for all parties, and that I am not required to enter into any agreement or settlement with any other party as part of entry into the Loss Mitigation Program. I also understand that no other party is required to enter into any agreement or settlement with me. I understand that **I am not required to request dismissal of this case** as part of any resolution or settlement that is offered or agreed to during the Loss Mitigation Period.

Sign: AGordon Date: 6/20/19, 2019

Print Name: Andrea Gordon

Telephone Number: (516) 608-5409
[First and Last Name]

E-mail Address [if any]: bjason85@gmail.com
[i.e. 999-999-9999]